

EVALUATION OF OUTCOME IN PATIENTS WITH PERFORATION PERITONITIS USING MANNHEIM'S PERITONITIS INDEX

INTRODUCTION

Peritonitis due to hollow viscous perforation is one of the most common surgical emergencies , and an important problem that a surgeon has to face. Despite advances in diagnosis, management and critical care of patients with peritonitis due to hollow viscus perforation, prognosis remains poor. Early assessment by scoring systems will influence the management and prognosis. Realising the need for a simple accurate scoring system in these conditions the present study was undertaken to evaluate the performance of MANNHEIM PERITONITIS INDEX (MPI)scoring system in predicting the risk of mortality in patients with peritonitis due to hollow viscous perforation.

OBJECTIVE

The objective of the study was to evaluate the efficacy of MANNHEIM PERITONITIS INDEX in predicting mortality in patients with perforation peritonitis.

METHODS

Retrospective study of 50 patients admitted and operated for peritonitis in Stanley Medical College Hospital. The structured scoring system i.e. MPI

was applied along with other clinical and biochemical parameters recorded in pre-structured proforma and the patients were grouped into 3 - Patients with MPI scores (a) less than 21 (b) 21 – 29 and (c) more than 29. Data was analysed for predicting mortality and morbidity using SPSS.

RESULTS

In our study of 50 patients, we had 7 mortalities(14% of the study population). In our study the there was no death in patients with MPI score less than 21 ,in MPI score between 21to 29 the mortality was 14.28%.,while in patients with MPI score greater than 29 the mortality was 100%(P <0.0005).With cutoff fixed at 29, sensitivity was 57.1% and specificity 100%. Among the MPI variables of adverse outcome ,Organ Failure(p <0.0005) and pre operative time >24 hrs(p <0.006) showed statistical significance in predicting mortality.

CONCLUSION

MPI is accurate to be used with patients with peritonitis and should be considered reliable and simple reference for estimating their risk of death

KEYWORDS

Predictor, Scoring, Sepsis, Perforation peritonitis, Mannheims' peritonitis index, prognosis